

1723

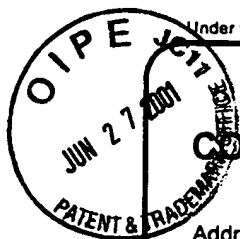
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PTO/SB/122 (10-00)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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# **CHANGE OF CORRESPONDENCE ADDRESS** *Application*

Address to:  
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Washington, D.C. 20231

Application Number	09/591009
Filing Date	06/09/00
First Named Inventor	ASHOK K. SHUKLA
Group Art Unit	
Examiner Name	
Attorney Docket Number	

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<input checked="" type="checkbox"/> Firm or Individual Name	ASHOK K. SHUKLA				
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Country	USA				
Telephone	410 465 2212	Fax	410 997 0772		

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☐ Attorney or Agent of record.
- ☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number \_\_\_\_\_

Typed or Printed  
Name

ASHOK K SHUKLA

Signature

*[Signature]*

Date

06/25/01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

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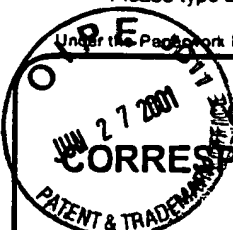
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Name

MUKTA SHUKLA

Signature

Mukta Shukla

Date

06/25/01

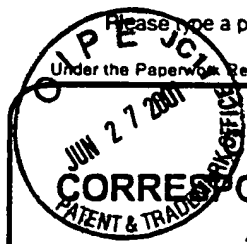
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Typed or Printed  
Name

AMITA SHUKLA

Signature

*Amita Shukla*

Date

06/25/01

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